## L02000011775

## 003017 Ferrell Schultz Carter Zumpano & Fertel A PROFESSIONAL ASSOCIATION PO Box 01-9693 201 South Biscayne Boulevard 34th Floor, Miami Center Miami, Florida 33131-4325 PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:

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2003 JUL 18 PM 4: 30

J. BRYAN JUL 2 2 2005



Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	3	1.5			
1. The name of the limite	d liability company:	is: Allende & E	3rea LLC		
2. The mailing address of				yne Blvd., 34th. Floor,	
Miami, FL 33131		- -			
05/09/2002			L02000011775_		
3. Date of filing/registrati	on in Florida	4.	. Document nun	nber	
5. The name of the registe Florida Department of S	State:	<del></del> -	dress as shown o	on the records of the	
	CT CORPORATI			<del></del> -	
	Address PLANTATION FL 33324 City, State and Zip  address of the new registered agent and/or office:  PABLO A. MELHEM  Name 201 South Biscayne Blvd., 34th. Floor Florida street address (P.O. Box NOT accentable)				
	Cit	ty, State and Zip		子子の手が	
6. The name and address of	of the new registered	l agent and/or offi	ice:	ILE 18 ASSE	
PABLO A. MELHEM					
	Name 201 South Biscayne Blvd., 34th. Floor			H: 30 ORATION FLORIDA	
•	Florida street addre	ess (P.O. Box NO	T acceptable)	ONS O	
	Miami	<sub>FL</sub> 33131			
	City	, State and Zip			
If the limited liability come confirmed that after the chand the business office of liability company, it is here the members of the limited the operating agreement of	ange or changes are	made, the Florida	a street address of	of the registered office	
(Signature of a prember or authorize	zed representative of a men	mber)	,	<del>u-</del> .	
0-0011	uarzant	<del>-</del>			
(Printed or typed name of signee)		<del></del>	, ,	#F	
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F. Or. if the address, I hereby confirm to the confirm of the confirm to the confirmation of the confirmation o	ntment as registered of all statutes relat discept the obligation is document is bein that the limited liabi	agent and agree ive to the proper ons of my position g filed to merely lity company has	to act in this cap and complete pe n as registered a reflect a change been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.	
(Signature of Registered Agent)					

FILING FEE: \$25.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)